

HOWARD COUNTY
PERMIT APPLICATION

PERMIT NUMBER

80002531
~~80002531~~

Building Address 10818 Vista Road
Columbia MD 21044

Suite/Apt. #: _____ SDP/WP/Petition #: _____

Census Tract 605102 Subdivision Holiday Hills

Section 6 Area _____ Lot 84

Tax Map 41 Parcel 304 Grid _____

Zoning R20 Map Coordinates _____ Lot size _____

Existing Use Single Family dwelling

Proposed Use Single Family dwelling

Estimated Construction Cost \$ 3000.00

Description of Work Extend overhang from SGD

14'8" to East side of house, close in

with Roof + Windows - Remove Existing

Windows 2 x 14 addition

Occupant or Tenant _____

Contact Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Property Owner's Name Joseph & Patricia Schaefer

Address - SAME -

City _____ State _____ Zip Code _____

Home Phone 410 531 2250 Work Phone SAME

Applicant's Name & Mailing Address, (if other than stated hereon): _____

Phone SAME Fax _____

Contractor Company Home owner

Contact Person _____

Address - SAME -

City _____ State _____ Zip Code _____

License No. _____

Phone _____ Fax _____

Engineer or Architect Company _____

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

Building Characteristics

Height: _____

No. of stories: _____

Gross area, sq. ft. per floor: _____

Use group: _____

Construction type:

____ Reinforced Concrete

____ Structural Steel

____ Masonry

____ Wood Frame

____ State Certified Modular

Utilities

Water Supply:

____ Public

____ Private

Sewage Disposal:

____ Public

____ Private

Electric Yes ☐ No ☐

Gas Yes ☐ No ☐

Heating System:

Electric ☐ Oil ☐

Natural Gas ☐

Propane Gas ☐

Sprinkler system: N/A ☐

____ Full

____ Partial

____ Other Suppression

____ # of Heads

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics

SF Dwelling ☒ SF Townhouse ☐

Depth _____ Width _____

1st floor: 26' 71'

2nd floor: 26'

Basement: _____

Finished Basement ☐ Unfinished Basement ☒

Crawl space ☐ Slab on Grade ☐

No. of Bedrooms 4

Height: 20'

Multi-family dwellings:

No. of efficiency units: _____

No. of 1 BR units: _____

No. of 2 BR units: _____

No. of 3 BR units: _____

Other Structure: _____

Dimensions: _____

Footings: _____

Roof Height: _____

____ State Certified Modular

____ Manufactured Home

Utilities

Water Supply:

☒ Public

____ Private

Sewage Disposal:

____ Public

☒ Private

Electric Yes ☒ No ☐

Gas Yes ☐ No ☒

Heating System:

Electric ☒ Oil ☐

Natural Gas ☐

Propane Gas ☐

Sprinkler system: N/A ☒

____ NFPA #13D

____ NFPA #13R

____ Other:

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERE TO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ON TO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Joseph G. Schaefer
Applicant's Signature

Homeowner
Title/Company

Joseph G. Schaefer
Print Name

8/21/08
Date

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
** PLEASE WRITE NEATLY AND LEGIBLY. **
- FOR OFFICE USE ONLY -

AGENCY DATE SIGNATURE APPROVAL

Land Development, DPZ

State Highways

Building Official

Dev. Engineering, DPZ

Health 8/27/08 John Doe

Fire Protection

Is Sediment Control approval required prior to issuance?

YES ☐ NO ☐

CONTINGENCY CONSTRUCTION START: ☐

ONE STOP SHOP: ☐

Distribution of Copies

White: Building Official

Green: LDD, DPZ

Yellow: DED, DPZ

Pink: Health

Gold: SHA

T:\forms\PERMIT.FRM

DPZ SETBACK INFORMATION

Front: _____ Filing fee \$ _____

Rear: _____ Permit fee \$ _____

Side: _____ Excise tax \$ _____

Side St.: _____ Add'l per. fee \$ _____

All minimum setbacks met? TOTAL FEES \$ _____

YES ☐ NO ☐ Sub-total paid \$ _____

Is Entrance Permit required? Balance due \$ _____

YES ☐ NO ☐ Check \$ _____

Historic District? Validation \$ _____

YES ☐ NO ☐

Lot Coverage for New Town Zone _____

SDP/Red-line approval date _____ Accepted by _____

APPROVED

WALKTHRU BUILDING PERMIT

BR# 800149862 A# 29094

APPROVED *STO* DATE: 8/27/28

DEED OF TRUST 14' 18" X 2

Overhang 5' 74" 27' E 152.0'

NOTE: THERE ARE NO EXIS
WITHIN 100 FEET OF THI

5' UTILITY EASEMENT

55L.F TRENCH, 2' WIDE, 2' DEEP
WITH 9.5' STONE

35' 20'

1250 GAL. SEPTIC
TANK

8" @ 1/4" FT.

5A PERC

22' GAR

FF = 544.5
CE = 536.2

0-2 PROP WELL

PROPOSED
EXTRACTION

LOT 83

LOT 85

